



ARIZONA DEPARTMENT OF PUBLIC SAFETY

2102 WEST ENCANTO BLVD. P.O. BOX 6488 PHOENIX, ARIZONA 85005-6638

(602) 256-6280

"Courteous Vigilance"

FIREARMS-SAFETY TRAINING COURSE AND ORGANIZATION AUTHORIZATION APPLICATION

To submit a firearms-safety training course for Departmental approval and to qualify for authorization of a Firearms-safety Training Organization please complete all parts of this form. No fee is required for course approval or the authorization of a firearms-safety training organization.

IMPORTANT: Make sure this application is complete and course materials are attached

TRAINING ORGANIZATION NAME	COUNTY		
PHYSICAL ADDRESS OF ORGANIZATION	CITY	STATE	ZIP CODE
MAILING ADDRESS OF ORGANIZATION IF DIFFERENT	CITY	STATE	ZIP CODE
NAME OF RESPONSIBLE PARTY (LAST, FIRST, MIDDLE)	PHONE NUMBER		

- Official DPS web site: www.azdps.gov/ccw

- Mail completed form and documents to:

Arizona Department of Public Safety
P.O. Box 6488
Phoenix, AZ 85005-6488
ATTN: Program Coordinator

Place stamp/seal here

- Questions may be directed to the Concealed-weapons Permit Unit at: (602) 256-6280 or 1-800-256-6280 (outside metropolitan Phoenix but within Arizona)
- Training Organizations are required to submit documentation they are legitimately doing business in Arizona.
- Training Organizations are required to submit a unique stamp or seal to DPS within 90 days of authorization as a DPS recognized Training Organization.
- Attach a detailed subject/topic outline of your proposed firearms safety training course, including correctly answered tests/examinations.

If you are submitting a training program course which was previously approved by DPS for another organization please provide the name of the training organization and the assigned program number:

Organization name: _____ Program number: _____

I attest that, to the best of my knowledge, all answers on the application are true and correct. I understand that I may be subject to criminal prosecution for falsification or misrepresentation of any document provided to the Arizona Department of Public Safety in the application process. Falsification or misrepresentation is also grounds for authorization being denied or revoked.

Responsible Party Signature

Date

Phoenix (602) 256-6280 *** Outside metropolitan Phoenix, but within Arizona 1-800-256-6280 *** Fax (602) 223-2928

Business hours 8:00 - 5:00 Monday through Friday

www.azdps.gov/ccw

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